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26479 7590 09/20/2005

STRAUB & POKOTYLO
620 TINTON AVENUE
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TINTON FALLS, NJ 07724

12/22/2005 SFELEKE2 00000073 10020703

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Michael P. Straub

(Depositor's name)

Michael P. Straub

(Signature)

December 19, 2005

(D)

| | | | | |
|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|

| | | | | |
|------------|------------|----------------------|-------------------------|------|
| 10/020,703 | 11/30/2001 | John G. N. Henderson | (DMSL)HA-86(HAL-ID 167) | 9576 |
|------------|------------|----------------------|-------------------------|------|

TITLE OF INVENTION: STEERABLE ANTENNA AND RECEIVER INTERFACE FOR TERRESTRIAL BROADCAST

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 12/20/2005 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | |
| PHAN, DAO LINDA | | 3662 | 342-372000 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Straub & Pokotylo

Michael P. Straub

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed in recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

Hitachi America, LTD.
Hitachi Home Electronics
(America), INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tarrytown, New York
San Diego, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael P. Straub

Date December 19, 2005

Typed or printed name

MICHAEL P. STRAUB

Registration No. 36,941

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|--|------------------------|----------------------|
| | | Application Number | 10/020,703 |
| | | Filing Date | November 30, 2001 |
| | | First Named Inventor | John G. N. HENDERSON |
| | | Group Art Unit | 3662 |
| | | Examiner Name | Dao Linda Phan |
| Total Number of Pages in This Submission | | Attorney Docket Number | HHEA-86 (HAL-ID 167) |

ENCLOSURES (check all that apply)

| | | | |
|---|--|--|--------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form (PTOL-85B) <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <div style="border: 1px solid black; padding: 2px;">Remarks</div> | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Postcard Receipt <input type="checkbox"/> Other Enclosure(s) (please identify below): | |
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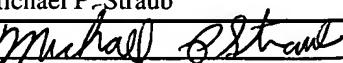
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Michael P. Straub (Reg. No. 36,941) |
| Signature |  |
| Date | December 19, 2005 |

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